## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):

John R. Subjeck, Robert A. Henderson, Elizabeth A. Repasky, Latif Kazim, and Xiang-Yang

Docket:

126.1-US-U3

Title:

STRESS PROTEIN COMPOSITIONS AND METHODS FOR PREVENTION AND

TREATMENT OF CANCER AND INFECTIOUS DISEASE

## **CERTIFICATE OF MAILING UNDER 37 CFR 1.10**

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Name: Isabell Ogata

**BOX PATENT APPLICATION** 

**Assistant Commissioner for Patents** 

Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- Transmittal sheet, in duplicate, containing Certificate Of Mailing Under 37 CFR 1.10.
- Utility Patent Application: Spec. 70 pgs; 45 claims; Abstract 1 pg(s).

The fee has been calculated as shown below in the "Claims as Filed" table.

- □ 38 sheets of Drawings.
- Two signed Combined Declaration and Power of Attorneys (8 pages).
- Assignment of the invention by co-inventors John R. Subjeck, Elizabeth A. Repasky, Latif Kazim, and Xiang-Yang Wang to Health Research, Inc., Recordation Form Cover Sheet
- Assignment of the invention by co-inventor Robert A. Henderson to Corixa Corporation, Recordation Form Cover Sheet.
- PTO-2038 Credit Card Payment Form for the amount of \$1,608.00 to cover the Filing Fee
- PTO-2038 Credit Card Payment Form for the amount of \$80.00 to cover the two (2) Assignment Recordation
- Computer readable and paper form of SEQUENCE LISTING. Applicants state that the paper copy form of the SEQUENCE LISTING section of the present application, and the computer readable form submitted herewith, are the same.
- The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government. The name of the U.S. Government agency and the U.S. Government contract number are: National Institutes of Health, Grant No. GM 45994.
- Return postcard

### CLAIMS AS FILED

Number of Claims Filed	Extra		er	Rate			Fee
Basic Filing Fee					Marked in		\$690.00
Total Claims							
45	20		25	х	\$18.00	=	\$450.00
Independent Claims							
9	3		6	x	\$78.00	=	\$468.00
MULTIPLE DEPENDENT CLA	AIM FEE			·			\$0.00
TOTAL FILING FEE		·-					\$1,608.00

Please charge all additional fees to Deposit Account No. 50-0494. A duplicate of this sheet is enclosed.

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